PAGE 1/6

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. EXELON CORPORATION POLITICAL ACTION COMMITTEE 701 9th Street, NW ADDRESS (number and street) 10th Floor (Check if address is changed) Washington 20001-4572 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Melissa.Lavinson@pepcoholdings.com (Check if address is changed) Optional Second E-Mail Address PACSERVICES@ddcpublicaffairs.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2022 C00141218 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lavinson, Melissa, , , Type or Print Name of Treasurer Lavinson, Melissa, , , [Electronically Filed] 02 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	C. Faure 1. (Davised 00/0000)	D 0
	C Form 1 (Revised 02/2009) DF COMMITTEE	Page 2
	date Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	N.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	emplete the candidate
Name of Candida		
Candida Party A	333	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o		
Party	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its control of the c	onnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
(Committees Participating in Joint Fundraiser	
	1. FEC ID number	
:	2.	
;	3.	
4	4. FEC ID number C	

_			_
FEC Form 1 (Revised	02/2000)		Page 3
Write or Type Committee Nam	·		raye 3
•			-
	PORATION POLITICAL A		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundrai	sing Representative, or Leaders	hip PAC Sponsor
Exelon Corporation			
Mailing Address	701 9th Street		
	10th Floor		
	Washington	DC 20001	
	CITY	STATE	ZIP CODE
	CITY	STATE	ZIP CODE
Relationship: x Connecte	d Organization Affiliated Committee Joint F	undraising Representative Lea	adership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional)	and position of the person in pos	ssession of committee
Chipps, K	atie, , ,		
Mailing Address	805 15th Street, NW Suite 300		
Mailing Address			
	Washington	, DC , 20005	
	vvasiiington		
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		phone number 202	204 0578
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasuassistant treasurer).	arer of the committee; and the na	me and address of
Full Name Lavinson, of Treasurer	Melissa, , ,		.
Mailing Address	701 9th Street, NW		
. .	10th Floor		
	Washington	DC 20001-45	572
	CITY	STATE	ZIP CODE
Title or Position Treasurer		202	805 2071

202

Telephone number

805

2071

	m 1 (Revised 02/2009)	Page 4
1201011		i age 🛪
Full Name of Designated Agent		
Mailing Address		
·		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other safety deposit bo	r Depositories: List all banks or other depositories in which the committee deposits funds, oxes or maintains funds.	noius accounts, tents
Name of Bank, I	Comerica Bank	
	Comerica Bank	
	Comerica Bank PO Box 75000	275-8042
	Comerica Bank PO Box 75000	275-8042 ZIP CODE
	Comerica Bank PO Box 75000 Detroit MI 482	
Mailing Address	Comerica Bank PO Box 75000 Detroit MI 482	ZIP CODE
Mailing Address	Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank, I	Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank, I	Comerica Bank PO Box 75000 Detroit CITY STATE Depository, etc.	ZIP CODE

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F + H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

This filing serves to update the Committee's Treasurer and Custodian of Records information. In addition, this filing serves to disaffiliate Exelon PAC (C00141218) from CEPAC (C00793711) effective 2/1/2022.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	-	Organization, Affiliated Committee, Joint Fundrais	• .	e, or Leadership PAC Sponsor
EX	elon Corporation	n-Pepco Holdings Inc. Political Action	Committee	
1	Mailing Address	701 Ninth Street NW		
		Room EP1202		
		Washington	DC	20001
F	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization X Affiliated Committee Joint Fo	undraising Representa	Leadership PAC Sponsor
8. Desig r	nated Agent: Identify	by name, address (phone number – optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Fu		by name, address (phone number – optional)		
Fu	II Name	by name, address (phone number – optional)		
Fu	II Name	by name, address (phone number – optional)		
Fu Ma	II Name	CITY	STATE A	ZIP CODE A
Fu Ma	II Name	CITY A	STATE A	ZIP CODE A
Fu Ma	II Name	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Ma Ti 9. Banks safety Name Deposi	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Ma Ti 9. Banks safety Name Deposi	II Nameailing Address ITLE OR POSITION To the control of Bank,	CITY Tele es: List all banks or other depositories in which the	phone Number	
Fu Ma Ti 9. Banks safety Name Deposi	ailing Address ITLE OR POSITION or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY Tele es: List all banks or other depositories in which the	phone Number	